CONDITIONS OF ACCEPTANCE 2027- RE-ENROLMENTS

Coordinator Contact Number- **0498 603 323** or **9724 4514-** answering machine available 24/7

OSHC Email: cassandra.jones@croydonhills.vic.edu.au

1. An enrolment form **must** be completed before acceptance into the program.
2. A **2027 behaviour agreement MUST** be completed before acceptance into the program.
3. Unacceptable behaviour will jeopardise the child's position within the program.
4. **Fees** must be paid on a weekly/fortnightly basis. They are as follows before ccs is applied:
   $32.00 per child for After School Care session
   $23.00 per child for Before School Care session
5. Fee Relief is available for families in the form of Child Care Subsidy, (CCS).
   Department of Human Services: 13 61 50
6. **An emergency booking fee of $5.00 per child** will be charged for bookings made on the day that care is required or if care is booked after 6:00pm the night before care is required except on a Monday, where bookings must be made by 6:00pm on Friday night.
7. Children must be collected by **6:30pm sharp.**
   ~ **A fee of $15.00** for any part of the first 15 minutes and then **$15.00 for every part of each 15 minute block thereafter** is charged for late collections.
   ~ Repeated late collections will jeopardise the position with the program.
8. **Bookings Cancellations / Non- attendance**
   ~ No fee will be charged if notice is given **before 6:00pm** the night before care is required
   ~ Full fee will be charged if a message is left on the answering machine **after 6:00pm** the night before care is required, or no notification is given at all. If care is booked for a Monday, notification must be given by **6:00pm on Friday.**
9. Bookings will be made according to the priority of access regulation. Refer to OSHC policies.
10. Casual bookings are accepted where vacancies are available these must be made prior to 6:00pm the night before to avoid the $5.00 emergency booking fee.
11. Curriculum Days will operate on designated Pupil Free Days and run from **7:00am-6:00pm.**
12. Notification must be given when contact details of families and emergency contacts change.
13. Before school care opens at **6:45am** and breakfast is served until **8:15am.**
14. Children are responsible for making their way to the OSHC After School Program. However, the preps will be collected from their classroom until the end of first term.
15. We are a SunSmart school. Children must wear broad brimmed hats from **September 1st until April 30th** and when the UV Rating is higher than 3. UV Ratings are checked each day before outside play.
16. Children attending activities before and after school on the school premises must have an **"Activity Release Consent Form"** completed. This can be obtained from the CHPS OSHC Program. An authorised adult is then able to sign your child out and is responsible for them whilst they are participating in the activities. Please note, the OSHC program is **NOT RESPONSIBLE** for your child once they have been signed out by an authorised adult.
17. Bank details to be uploade on the Kidsoft Portal by family before starting date. This is so payment of fees can be deducted on either a weekly or fortnightly basis. Coordinator will send link to Kidsoft Portal once child is registered into OSHC to do so.
18. Family Handbook is available online on the school website or a hard copy can be requested.

Thank you for your co-operation and welcome to CHPS OSHC,

Cassie Jones-OSHC Coordinator

OSHC RE-ENROLMENT FORM 2027
-ALREADY ENROLLED CHILDREN-

ATTENDANCE

Child Details

Family Name		Given Name	
Preferred First Name		Date Of Birth	

2027 Bookings:

Days of attendance	Mon	Tue	Wed	Thurs.	Fri
Before School Care (Tick):					
After School Care (Tick):					

Child Start Date: ____/____/____

Parent/Guardian Name		Date	
Parent/Guardian Signature			
OSHC Coordinator Name and Signature	*Cassie Jones*	Date Entered	

ENROLMENT INFORMATION UPDATE

Please complete this form to update enrolment details, including Medical Information and Emergency Contact details.

If information remains the same as the 2026 OSHC Enrolment. Please write no change or leave blank in heading of each sub-section unless stated otherwise on top of page.

Please complete this page.

Please ensure ALL of the following documents are attached to this application before submission:

Signed Behaviour Agreement-2027		ASCIA Action Plan (Anaphylaxis) Action Plan (Asthma)	
Tick boxes on last page		Copies of any family law or other relevant court Orders and/or legal documents	

CHILD DETAILS			
Family Name		Given Name	
Preferred First Name		Date of Birth	
Address			
Year Level and Teacher			

PARENT/GUARDIAN INFORMATION UPDATE		
	Parent/Guardian 1	Parent/Guardian 2
Full Name		
Address		
Relationship to Child		
Work Phone Number		
Mobile Number		
Email Address		
Occupation		

FAMILY LAW, AVOs OR OTHER RELEVANT COURT ORDER DETAILS *[Regulation 160 (3c, d)]*						
Are there any relevant court orders, parenting orders or parenting plans relating to the powers, duties and responsibilities or authorities of any person in relation to the child or access to the child? (If yes, please provide all relevant documentation and paperwork)	Documentation attached					
	YES		NO		N/A	
Are there any other relevant court orders relating to the child's residence or the child's contact with a parent or other person? (If yes, please provide all relevant documentation and paperwork)	Documentation attached					
	YES		NO		N/A	
Have photographs and names of unauthorised people been attached to this form?	Documentation attached					
	YES		NO		N/A	
Briefly outline court order requirements						

MEDICAL INFORMATION UPDATE			
Name of Doctor			
Medical Centre		Phone number	
Address			
Dentist name			
Name of Service		Phone number	
Address			
ASCIA Action Plan (Anaphylaxis) or Action Plan (Asthma) update		Attached	Y / N
Medical Condition Please identify any new medical conditions.			

EMERGENCY CONTACTS UPDATE			
There may be times or situations where your child has had an accident, injury, trauma or illness and parent/s cannot be reached or are unable to collect their child. Please provide information about **two** people who are authorised to be contacted in case of an emergency and/or are authorised to collect your child. Each person must live a maximum of **30 minutes** from the Service and must provide identification when collecting the child. **Please ensure you have obtained the person's consent before listing them as an emergency contact.**			
1: EMERGENCY CONTACT - Full Name			
Relationship to Child			
Phone Number	(H) (M) (W)		
Address			
Email Address			
Can this person be contacted to collect your child from the education and care service	Yes/No	Parent 1 Signature	
		Parent 2 Signature	
Can this person be contacted to give consent for medical treatment or to authorise for a Nominated Supervisor or educator to administer medication to the child in the event that you cannot be contacted? (Please Circle)	Yes/No	Parent 1 Signature	
		Parent 2 Signature	
Can this person be contacted to give consent for educators to take the child outside the Service's premises in the event that you cannot be contacted? (Please Circle)	Yes/No	Parent 1 Signature	
		Parent 2 Signature	
Can this person give authorisation for the Service to take the child on regular outings? (Please Circle)	Yes/No	Parent 1 Signature	
		Parent 2 Signature	
Is this person authorised to authorise the education and care service to transport the child or arrange transportation for the child? (Please Circle)	Yes/No	Parent 1 Signature	
		Parent 2 Signature	

2: EMERGENCY CONTACTS UPDATE			
EMERGENCY CONTACT - Full Name			
Relationship to Child			
Phone Number	(H) (M) (W)		
Address			
Email Address			
Can this person be contacted to collect your child from the education and care service	Yes/No	Parent 1 Signature	
		Parent 2 Signature	
Can this person be contacted to give consent for medical treatment or to authorise for a Nominated Supervisor or educator to administer medication to the child in the event that you cannot be contacted? (Please Circle)	Yes/No	Parent 1 Signature	
		Parent 2 Signature	
Can this person be contacted to give consent for educators to take the child outside the Service's premises in the event that you cannot be contacted? (Please Circle)	Yes/No	Parent 1 Signature	
		Parent 2 Signature	
Can this person give authorisation for the Service to take the child on regular outings? (Please Circle)	Yes/No	Parent 1 Signature	
		Parent 2 Signature	
Is this person authorised to authorise the education and care service to transport the child or arrange transportation for the child? (Please Circle)	Yes/No	Parent 1 Signature	
		Parent 2 Signature	

Comments:

Please complete this page.

2027 OSHC ANNUAL BEHAVIOUR AGREEMENT

Child Name: _____

All students who attend Croydon Hills Primary School Out of School Hours Care are expected to follow all directions whilst in the care of OSHC staff.

This applies to:

- Excursion
- Incursions
- Attendance on site at Before and After School Care
- If at any time, a child's behaviour is physically unsafe or unmanageable in the OSHC environment (behaviour over and above any diagnoses), staff may contact the parent/guardian to collect the child from the service
- Continued behaviour as listed above may result in the child being removed from the service for a period of time (determined by the coordinator and school leadership team). This will be done in consultation with families and after significant behaviour management strategies have been implemented
- In terms of the removal for a period of time, parents will receive two behaviour notices via email before the third. The third resulting in the removal of the child from the OSHC service. The behaviour notices will outline the behaviour in which has occurred
- Respect must be shown at all times to all people, property and the environment. Any damaged property to be paid for by the child's parents/guardians

STAFF RESERVE THE RIGHT TO CONTACT PARENTS/GUARDIANS AND ASK THEM TO COLLECT THEIR CHILD/REN IF THIS BEHAVIOUR AGREEMENT IS BROKEN

Parent/Guardian Declaration:

I/We have read the above behavioural expectations and processes and understand that in the event that my child behaves in unsafe ways, that I will be called to collect them at the time and have a meeting post event to discuss behavioural management plans. I also understand that if these plans are unsuccessful, I may need to make alternative care arrangements for my child/ren for a period of time. Furthermore, I understand I could receive two behaviour notices via email outlining the behavioural occurrence, in which means another behaviour notice results in my child/ren being removed from the service.

Parent/Guardian 1 Name:_____ Sign_____ Date: __/__/_____

Parent/Guardian 2 Name:_____ Sign_____ Date: __/__/_____

Regards, Cassie & the OSHC Team

Please complete this page.

2027 ENROLMENT AGREEMENT

Please read the following agreement carefully before signing. If there is anything within this document that you are unsure of, please ask for clarification.

HEALTH AND SAFETY

I/we give permission for this child to: Participate in outings to places of interest (A permission slip will have to be signed before allowing your child to leave the Service)	YES	NO
I/we give permission for this child to apply SPF30+ sunscreen prior to sun exposure (If not, please provide a letter releasing the Service of any Liability)	YES	NO
Have Band-Aids or sticking plasters applied when necessary	YES	NO

TECHNOLOGY AND PHOTOGRAPHY

For photos and video footage to be taken of my/our child for Service use and staff training purposes (footage will not leave the Service)	YES	NO
For photos and video footage of my/our child to be used in Learning Stories, and to be shared with other families that attend the Service	YES	NO
For photos and video footage of my/our child to be used for student training purposes (Photos and video footage may leave the Service for students to present to lecturer and class for viewing and marking)	YES	NO
For photos and video footage of my/our child to be used on Service website, social media and other internet purposes, such as advertisement and used in organisation's resources	YES	NO
I allow my child to watch movies deemed appropriate by staff which has a rating of either 'G' or 'PG' in the centre and on excursions	YES	NO
I allow my child to use the OSHC Ipads for free play at the service (20minutes a day)- please note these Ipads do not have any internet connection and are closely monitored	YES	NO
I understand if my child has a mobile device, it MUST be handed into the OSHC office on arrival and picked back up on departure from the service that session	YES	NO
I understand if my child has a smart watch, it MUST be in school mode for the whole duration at OSHC. Watches will be removed from children and placed in OSHC office if this rule is not adhered to	YES	NO
5/6 Families: I allow my child to use their Chromebook for homework purposes ONLY at OSHC. Not free play.	YES	NO

Privacy Disclaimer - We acknowledge and respect the privacy of its clients. The enrolment information that is collected assists us to meet our legislative obligations and to provide the best level of education and care for your child. By completing this form, you have consented to this information being collected. The information will be used by educators/staff members and relevant government authorities. You have the right to access and alter personal information concerning yourself or your child in accordance with the Privacy Act 1988 and our Privacy and Confidentiality Policy.

I have read and understood the information in this application. Information provided about my child/ren or other people, has been given with their authorisation.			
Primary Parent / Guardian Name		Date	
Signature			